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Customized PTO/SB/21 (04-04)

| | | |
|--|----------------|----------------|
| TRANSMITTAL FORM (for all correspondence after initial filing) | Application # | 10/774,448 |
| | Confirmation # | 8832 |
| | Filing Date | 02/10/2004 |
| | First Inventor | Von Fay |
| | Art Unit | 1755 |
| | Examiner | A. Green |
| Total number of pages in this submission = | Docket # | P08113US00/RFH |

| ENCLOSURES (check all that apply) | |
|---|---|
| <input type="checkbox"/> Fees calculated below | <input type="checkbox"/> Response to Missing Parts/Incomplete Appl. |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Certified Copy of Priority Document(s) |
| <input checked="" type="checkbox"/> including Attachment(s) | <input type="checkbox"/> Information Disclosure Statement |
| <input type="checkbox"/> After Final Amendment/Reply | <input type="checkbox"/> Drawing(s) |
| <input type="checkbox"/> including Attachment(s) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Extension of Time Petition | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

| FEES CALCULATION: For claims if required and/or other fees as shown below: | | | | | |
|--|-----|---------------------|---------------|-----------|----|
| | NOW | Previously Paid For | Present Extra | Rate | \$ |
| <input checked="" type="checkbox"/> TOTAL CLAIMS | 14 | 20 | 0 | X \$ 18 = | |
| <input checked="" type="checkbox"/> INDEP. CLAIMS | 3 | 3 | 0 | X \$ 88 = | |
| TOTAL OF ABOVE CLAIMS FEES = | | | | | |
| <input type="checkbox"/> Reduction by 1/2 for small entity status of applicant | | | | | |
| SUBTOTAL = | | | | | |
| <input type="checkbox"/> Fee for extension of time (per attached Petition) | | | | | |
| <input type="checkbox"/> Other fee for | | | | | |
| TOTAL OF ALL FEES = | | | | | 0 |

..... A CREDIT CARD PAYMENT FORM (PTO-2038) in the amount of \$ * is enclosed.

☒ The Commissioner is authorized to charge any fee, additional fee or extension fee due in connection herewith to Deposit Account No. 12-0555:

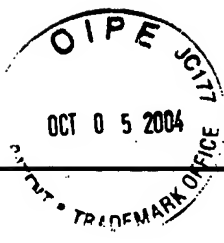
(1) if no payment or an insufficient payment is enclosed and a fee is due in connection herewith; or

(2) if no petition for extension of time is enclosed but an EOT is required - and in this event, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely.

Date: October 5, 2004

By: Ross F. Hunt, Jr.
Registration No.: 24,082

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| | | |
|------------------|----------------|----------------|
| AMENDMENT | Application # | 10/774,448 |
| | Confirmation # | 8832 |
| | Filing Date | 02/10/2004 |
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| | Art Unit | 1755 |
| | Examiner | A. Green |
| | Docket # | P08113US00/RFH |

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

S I R:

Responsive to the Office Action mailed on August 24, 2004:

A) please consider the responsive **Remarks** provided herewith in **Attachment A**; and

B) please amend the above identified application as follows:

- **Amendments to the Claims** are reflected in the listing of the claims provided herewith in **Attachment B**.

It is respectfully submitted that the application is now in condition for allowance.

Respectfully submitted,

Date:

October 5, 2004


By: Ross F. Hunt, Jr.

Registration No.: 24,082

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